

01/17/02  
J1048 U.S. PTO

01-23-02

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PTO/SB/05

<p>UTILITY PATENT APPLICATION TRANSMITTAL</p>	<p>Attorney Docket No.: 1390.C2/CPI/PJS First Inventor: NULMAN Title: COILS FOR GENERATING A PLASMA AND FOR SPUTTERING Express Mail Label No.: EL 873 296 127 US</p>
<p>APPLICATION ELEMENTS</p>	<p>ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231</p>
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/17) 2. <input checked="" type="checkbox"/> Specification Total Pages <u>29</u> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed Sponsored R&amp;D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawing(s) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) <b>Informal</b> Sheets <u>9</u> <b>Formal</b> Sheets <u>8</u> 4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <u>5</u> a. <input type="checkbox"/> Newly executed b. <input checked="" type="checkbox"/> Copy from a prior application i. <input type="checkbox"/> Deletion of Inventor(s): Signed statement attached deleting inventor(s) named in the prior application</p>	<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies <b>ACCOMPANYING APPLICATION PARTS</b> 7. <input type="checkbox"/> Assignment papers (cover sheet &amp; documents) 8. <input type="checkbox"/> 37 CFR 3.73 (b) Statement <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document 10. <input checked="" type="checkbox"/> Information Disclosure Statement (PTO-1449) <input type="checkbox"/> Copies of IDS Citations 11a. <input checked="" type="checkbox"/> First Preliminary Amendment 11b. <input checked="" type="checkbox"/> Second Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard 13. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, status still proper and desired 14. <input type="checkbox"/> Certified copy of priority document(s) 15. <input type="checkbox"/> Other:</p>
<p>16. <b>If a CONTINUING APPLICATION</b>, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: <u>08/851,946</u> Prior application information: Examiner <u>R. McDonald</u> Group/Art Unit <u>1753</u> For Continuation or Divisional Apps only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>	
<p>17. CORRESPONDENCE ADDRESS</p>	
<p><input type="checkbox"/> Customer Number or Bar Code Label 24033 or <input checked="" type="checkbox"/> Correspondence Address below: Name: Patent Counsel, APPLIED MATERIALS, INC. Address: Post Office Box 450A City: Santa Clara State: California Zip Code: 95052 Country: U.S.A. Telephone: (310) 556-7983 Fax: (310) 556-7984</p>	
<p>Name (Print/type) William K. Konrad Registration No. 28,868 Signature <i>William K. Konrad</i> Date <u>1/17/02</u></p>	

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10/052951  
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<b>FEE TRANSMITTAL</b>	Application Number	
<b>for FY 2002</b>	Filing Date	
	First Named Inventor	NULMAN
	Group Art Unit	
	Examiner Name	
Total Amount of Payment: \$992.00	Attorney Docket Number	1390.C2/CPI/PJS

**METHOD OF PAYMENT (check one)**

1. The Commissioner is hereby authorized to charge the indicated fees and/or credit any overpayments to  
 Deposit Account Number: 50-0585  
☐ Charge any additional fee required under 37 CFR 1.16 and 1.17  
☒ Charge any deficiency or credit any overpayment

2. ☒ Payment enclosed:  
☒ Check ☐ Money Order ☐ Other

**FEE CALCULATION**

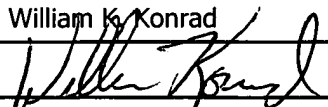
1. BASIC FILING FEE  
 Utility Filing Fee:  
 Large Entity Fee Code 101 (\$740.00)  
  
 Fee Submitted: \$740.00
2. EXTRA CLAIM FEES  
 Total Claims 34 - 20\* x \$18 = \$252.00  
 Independent  
 Claims 3 - 3\* x \$84 = \$  
  
 Multiple Dependent \$280 \$  
  
 SUBTOTAL \$992.00

\*(or number previously paid for)

**FEE CALCULATION (continued)**

3. ADDITIONAL FEES (large entity)
- |   |        |
|---|--------|
| <input type="checkbox"/> Surcharge - late filing fee or oath                    | \$130  |
| <input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet | \$50   |
| <input type="checkbox"/> Non-English specification                              | \$130  |
| <input type="checkbox"/> International type search report                       | \$40   |
| <input type="checkbox"/> Requesting publication of SIR prior to action          | \$920  |
| <input type="checkbox"/> Requesting publication of SIR after action             | \$1840 |
| <input type="checkbox"/> Extension for reply - first month                      | \$110  |
| <input type="checkbox"/> Extension for reply - second month                     | \$400  |
| <input type="checkbox"/> Extension for reply - third month                      | \$920  |
| <input type="checkbox"/> Extension for reply - fourth month                     | \$1440 |
| <input type="checkbox"/> Extension for reply - fifth month                      | \$1960 |
| <input type="checkbox"/> Notice of Appeal                                       | \$320  |
| <input type="checkbox"/> Brief in Support of Appeal                             | \$320  |
| <input type="checkbox"/> Request for Oral Hearing                               | \$280  |
| <input type="checkbox"/> Utility issue fee                                      | \$1280 |
| <input type="checkbox"/> Petition to revive (unavoidable)                       | \$110  |
| <input type="checkbox"/> Petition to revive (unintentional)                     | \$1280 |
| <input type="checkbox"/> Petitions to the Commissioner                          | \$130  |
| <input type="checkbox"/> Petitions related to provisional applications          | \$50   |
| <input type="checkbox"/> Submission of Information Disclosure Statement         | \$180  |
| <input type="checkbox"/> Recordation of Assignment                              | \$40   |
| <input type="checkbox"/> Submission after final (37 CFR 1.129(a))               | \$740  |
| <input type="checkbox"/> Request for Continued Examination (RCE)                | \$740  |
| <input type="checkbox"/> Other:   |        |
| <b>SUBTOTAL</b>   | \$     |

**Submitted by:**

Firm or Individual Name:	William K. Konrad	
Signature:		
Reg. No: 28,868	Telephone: (340) 556-7983	Date: 1/17/02